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FEC FORM 3

Only

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

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1. NAME OF TYPE OR COMMITTEE (in full)	PRINT ▼	Example: If typing, type over the lines.	12FE4M5	Ä
Check if different than previously	STOWN CITY 3. IS THE	YA NEW	NJ 079€ STATE ▲ AMENDED (A)	ZIP CODE ▲ STATE ▼ DISTRICT
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q2) January 31 Year-End Report (N	na) Electic	y POST-Election Report for t General (30G)	General (12G) Special (12S)	in the State of Special (30S) in the State of
5. Covering Period 04 01	2011	through 0	6 30 2	2011
I certify that I have examined this Report a Type or Print Name of Treasurer WARE	EN J. LESHNE		пие, сопестала сотр	
Signature of Treasurer	1 Lenh		Date 07	12 2011
NOTE: Submission of false, erroneous, or inco	mplete information	may subject the person signing		
Office Use			9	EC FORM 3 levised 02/2003)